

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)  Sheet 1 of 1	<b>Complete if Known</b>	
	Application Number	10/577,567
	Filing Date	April 27, 2006
	First named Inventor	Kenneth J. Ruchala
	Group Art Unit	Unknown
	Examiner name	Unknown
	Attorney Docket Number	013869-9007-01

### U.S. Patent Documents

Examiner Initials		U.S. Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document
		6,405,072	Cosman	6/11/2002

### FOREIGN PATENT DOCUMENTS

Examiner Initials		Country Code	Foreign Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Translation	English Abstract

T:\CLIENTA\013869\9007\A2389620.1

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office, Washington, DC 0231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box Alexandria, VA 22313-1450.